

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Sm		11/30/98
O.I.P.E. CLASSIFIER			12/1/98
FORMALITY REVIEW	DTB	70014	12/15/99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral) Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	11/30/98
2	11/30/98
3	11/30/98
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Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions  
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BEST AVAILABLE COPY